SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) NRSC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name WINRED Date of Receipt Mailing Address P.O. BOX 9891 2020 City Zip Code State Transaction ID: SA11C.15726570170164 ARLINGTON VA 22219-1891 Amount of Each Receipt this Period FEC ID number of contributing C00694323 30.00 federal political committee. Name of Employer (for Individual) X Memo Item Occupation (for Individual) CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General SEE ATTRIBUTION BELOW FOR ALL DONORS 30671781.24 ABOVE ITEMIZATION THRESHOLD Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** ROESELER, BILLY, , , Date of Receipt Mailing Address 11410 NE 124TH ST 2020 City State Zip Code Transaction ID: SA11A.15728749 **KIRKLAND** WA 98034-4305 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **RETIRED** CONTRIBUTION **RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General EARMARKED FROM WINRED Other (specify) ▼ 215.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. WINRED Date of Receipt Mailing Address P.O. BOX 9891 22 2020 City Zip Code State Transaction ID: SA11C.15726570170165 VA **ARLINGTON** 22219-1891 Amount of Each Receipt this Period FEC ID number of contributing 45.00 C00694323 federal political committee. X Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General SEE ATTRIBUTION BELOW FOR ALL DONORS 30671781.24 Other (specify) ABOVE ITEMIZATION THRESHOLD 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 1 9 1 1 9 1 1 9